O'D ONNELL CLARK LLP

LTR - FAX

Phone 503-306-0224

Fax 503-306-0257 www.oandc.com

1706 NW Glisan St , Suite 6

Portland, Oregon 97209

Mark P O'Donnell Kelly W G Clark Matthew D. Lowe* Kristian S Roggendorf Jonathan A Clark

July 20, 2004

Via Facsimile & Mail

Jeff S. Jordan
Supervisory Attorney
Complaints Examinations & Legal Administration
Federal Election Commission
Washington D.C. 20463

FEDERAL ELECTION
COMMISSION
OFFICE OF GENERAL
COULSEL

RE: In the matter of: Nader for President 2004, et al

MUR No.: 5475

Dear Mr. Jordan:

273.2

Please be advised that I represent Oregon Family Council, Tim Nashiff, Staff, and Mike White, Staff, in the above-referenced matter. Enclosed are executed Statements of Designation of Counsel. My clients received the Complaint on July 13, 2004, and I received a copy of it on July 15th.

As my paralegal informed Kim Stevenson, a paralegal in your office today, I will need to request an extension of time to prepare and file a response on behalf of my clients. Starting today, I enter a significant trial which is expected to run for the next 10-14 days (Zibell v. Maxim Health Services, Inc., et al, Multnomah County Circuit Court Case No. 0301-00993).

Respectfully, please let me know whether I may have a 30 day extension until August 12, 2004, in which to prepare and file my clients' response. Thank you.

Very truly yours,

Elly Clark

Kelly Clark

KC/rk

cc: Oregon Family Council

Mr. Tim Nashiff Mr. Mike White 5644121406

STATEMENT OF DESIGNATION OF COUNSEL

Please use one form for each respondent

MUR5475		
NAME OF COUNSEL: Kelly Clark		
FIRM: 0'Donnell & Clark LLP		
ADDRESS: 1706 NW Glisan St.		
Suite 6		
Portand, OR 97209		
TELEPHONE: (503) 306-0224		FEDER CO OFFICE C
FAX:(_503_)_306-0257	291,	AL ELI OF GE
The above-named individual is hereby designated and is authorized to receive any notifications and other from the Commission and to act on my behalf before the Oregon Family Council	commir	ications
Print Name 7-19-04 Date Signature		Divetor
Date (Signature	Title	
RESPONDENT'S NAME: Oregon Family Council		
ADDRESS: P.O. Box 13367		
Portland, OR 97213		
TELEPHONE: HOME(,		

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STATEMENT OF DESIGNATION OF COUNSEL Please use one form for each respondent

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NAME OF COUNSEL: Kelly Clark	
FIRM: 0'Donnell & Clark LLP	
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Portand, OR 97209	Z9
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RESPONDENT'S NAME: Mike White	
ADDRESS:	
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STATEMENT OF DESIGNATION OF COUNSEL Please use one form for each respondent

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NAME OF COUNSEL: Kelly Clark	
FIRM: O'Donnell & Clark LLP	
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Date Signature	Title
RESPONDENT'S NAME: Tim Neshif	
ADDRESS:	

TELEPHONE, HOME(

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